

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

CITIZENS FOR RUSH

ADDRESS (number and street)

P. O. Box 7292

Check if different
than previously
reported. (ACC)

CHICAGO

IL

60680-7292

2. FEC IDENTIFICATION NUMBER ▼

C

C00257121

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

IL

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sheila L. Jackson

Signature of Treasurer

Sheila L. Jackson

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 25

Write or Type Committee Name

CITIZENS FOR RUSH

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	48000.00	207401.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	48000.00	207401.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9139.31	92181.33
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	9139.31	92181.33
8. Cash on Hand at Close of Reporting Period (from Line 27)	46000.61	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25589.43	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 25

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CITIZENS FOR RUSH

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

21150.00

(ii) Unitemized.....

0.00

751.00

(iii) TOTAL of contributions from individuals ▶

0.00

21901.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

48000.00

185500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

48000.00

207401.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

48000.00

207401.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9139.31	92181.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	31366.28	120250.41
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	40505.59	212431.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	38506.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	48000.00
25. SUBTOTAL (add Line 23 and Line 24).....	86506.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40505.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	46000.61

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 25

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC

Mailing Address 20 F ST NW, STE 1000
 ATTN: SARA MORSE

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee.

C C00382424

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2013

Transaction ID : SA11C.16340

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF TEACHERS COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE N W

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee.

C C00028860

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2013

Transaction ID : SA11C.16370

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing federal political committee.

C C00255752

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2013

Transaction ID : SA11C.16355

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH**A.** Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEEMailing Address 1300 Eye Street NW
Suite 470 East

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11C.16356

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
ASBESTOS WORKERS LOCAL 60 PAC

Mailing Address 13000 NW 47 AVE

City	State	Zip Code
MIAMI	FL	33054

FEC ID number of contributing
federal political committee.**C** C00152223

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

Transaction ID : SA11C.16349

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)Mailing Address 175 E. Houston Street
Room 7-A-50

City	State	Zip Code
San Antonio	TX	78205

FEC ID number of contributing
federal political committee.**C** C00109017

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2013

Transaction ID : SA11C.16342

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
AUTOMOTIVE/AFTERMARKET PAC OF AUTOMOTIVE SERVICE INDUSTRY ASSOC

Mailing Address **7101 WISCONSIN AVENUE SUITE 1300**

City	State	Zip Code
BETHESDA	MD	20814

FEC ID number of contributing federal political committee.

C C00250753

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

Transaction ID : SA11C.16359

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address **P.O. Box 961039**
Suite 220

City	State	Zip Code
Fort Worth	TX	76161

FEC ID number of contributing federal political committee.

C C00235739

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2013

Transaction ID : SA11C.16360

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)
BP CORPORATION NORTH AMERICA INC. POLITICAL ACTION COMMITTEE

Mailing Address **501 WESTLAKE PARK BLVD**

City	State	Zip Code
HOUSTON	TX	77079

FEC ID number of contributing federal political committee.

C C00060103

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2013

Transaction ID : SA11C.16366

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)
 CARPENTERS LEGISLATIVE IMPROVEMENT COMM, UNITED BROTHERHOOD OF CARPENTERS & JOINERS OF AME

A. Mailing Address 101 CONSTITUTION AVENUE NW

City State Zip Code
 WASHINGTON DC 20001

FEC ID number of contributing
federal political committee.

C C00001016

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 12 2013

Transaction ID : SA11C.16363

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 Pennsylvania Ave, NW, Ste 560
 Suite 560

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00163832

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 13 2013

Transaction ID : SA11C.16357

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
FORD MOTOR COMPANY CIVIC ACTION FUND

Mailing Address % COMERICA BANK PAC SERVICES
 MC 2250

City State Zip Code
 DETROIT MI 48275

FEC ID number of contributing
federal political committee.

C C00046474

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
 12 30 2013

Transaction ID : SA11C.16350

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 Pennsylvania Ave NW
 Suite 900W

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11C.16343

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
MACHINISTS NON-PARTISAN POLITICAL LEAGUE

Mailing Address 9000 MACHINISTS PLACE

City	State	Zip Code
UPPER MARLBORO	MD	20772

FEC ID number of contributing
federal political committee.

C C00002469

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 / 11 / 2013

Transaction ID : SA11C.16362

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N Street NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing
federal political committee.

C C00009985

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11C.16344

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE

Mailing Address 700 UNIVERSE BLVD.

City JUNO BEACH	State FL	Zip Code 33408
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2013

Transaction ID : SA11C.16368

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address 3 Commercial Place
 Suite 375

City Norfolk	State VA	Zip Code 23510
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009282

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11C.16354

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)
SEAFARERS POLITICAL ACTIVITY DONATION-SEAFARERS INTERNAT'L UNION OF NA-AGLIWD DIST (SPAD)

Mailing Address 5201 AUTH WAY

City CAMP SPRINGS	State MD	Zip Code 20746
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2013

Transaction ID : SA11C.16358

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 25

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH**A.** Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENTMailing Address 600 13th St., NW
Suite 340City State Zip Code
Washington DC 20005FEC ID number of contributing
federal political committee.**C** C00010470

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
12 17 2013**Transaction ID : SA11C.16345**

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

48000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Allstate Insurance Company

Mailing Address Not Available

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

City	State	Zip Code
Chicago	IL	60600

Purpose of Disbursement
AUTOMOBILE INSURANCE

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

108.54

Transaction ID : SB17.16391

B. A T & T

Full Name (Last, First, Middle Initial)

Mailing Address Bill Payment Center

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2013

City	State	Zip Code
Chicago	IL	60600

Purpose of Disbursement
BANK SERVICE CHARGES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

393.17

Transaction ID : SB17.16388

C. A T & T

Full Name (Last, First, Middle Initial)

Mailing Address Bill Payment Center

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2013

City	State	Zip Code
Chicago	IL	60600

Purpose of Disbursement
MOBIL TELEPHONE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

251.31

Transaction ID : SB17.16389

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

753.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. A T & T

Mailing Address Bill Payment Center

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2013

City	State	Zip Code
Chicago	IL	60600

Amount of Each Disbursement this Period

247.34

Purpose of Disbursement
MOBILE TELEPHONE SERVICE

001

Transaction ID : SB17.16376

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Dickstein Shapiro, LLP

Mailing Address 1825 Eye Street, NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

City	State	Zip Code
Washington	DC	20006

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Legal Services

001

Transaction ID : SB17.16371

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. FOX FORD LINCOLN

Mailing Address 2401 S. Michigan Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

City	State	Zip Code
Chicago	IL	60616

Amount of Each Disbursement this Period

672.16

Purpose of Disbursement
AUTOMOBILE SERVICE AND REPAIRS

002

Transaction ID : SB17.16383

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5919.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Sheila L. Jackson

Mailing Address P.O. Box 7292

City	State	Zip Code
Chicago	IL	60680-7292

Purpose of Disbursement
Accounting Fee Nov & Dec

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

1100.00

Transaction ID : SB17.16395

B. United Storage

Mailing Address 2541 S. King Drive

City	State	Zip Code
Chicago	IL	60616

Purpose of Disbursement
STORAGE UNIT

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2013

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.16384

c. United Storage

Mailing Address 2541 S. King Drive

City	State	Zip Code
Chicago	IL	60616

Purpose of Disbursement
STORAGE UNIT RENTAL - NOV & DEC

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2013

Amount of Each Disbursement this Period

466.00

Transaction ID : SB17.16394

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2216.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Urban Partnership Bank

Mailing Address PO Box 19260

City	State	Zip Code
Chicago	IL	60619-0260

Purpose of Disbursement
BANK SERVICE CHARGES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	1	3

Amount of Each Disbursement this Period

2	0	.	2	8
---	---	---	---	---

Transaction ID : SB17.16386

B. Urban Partnership Bank

Mailing Address PO Box 19260

City	State	Zip Code
Chicago	IL	60619-0260

Purpose of Disbursement
BANK SERVICE CHARGES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	1	3

Amount of Each Disbursement this Period

2	0	.	9	4
---	---	---	---	---

Transaction ID : SB17.16390

c. Urban Partnership Bank

Mailing Address PO Box 19260

City	State	Zip Code
Chicago	IL	60619-0260

Purpose of Disbursement
Bank Service Charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

Amount of Each Disbursement this Period

2	1	.	5	7
---	---	---	---	---

Transaction ID : SB17.16375

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6	2	.	7	9
---	---	---	---	---

8	9	5	1	.	3	1
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 25

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Angerholzer Broz Consulting, LLCMailing Address 499 South Capitol Street SW
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Consultant

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

Amount of Each Disbursement this Period

25129.53

Transaction ID : SB21.16373

B. Office Depot

Mailing Address 5420 S. Lake Park Ave.

City Chicago State IL Zip Code 60615

Purpose of Disbursement
Office Supplies

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2013

Amount of Each Disbursement this Period

56.75

Transaction ID : SB21.16401

C. David Patterson

Mailing Address 8730 Grasmere Court

City Fort Washington State MD Zip Code 20744

Purpose of Disbursement
XMAS CARDS, PRINTING & MAILING

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB21.16378

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

27686.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 25

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. David Patterson

Mailing Address 8730 Grasmere Court

City	State	Zip Code
Fort Washington	MD	20744

Purpose of Disbursement
PHOTOGRAPHY AND DESIGN

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

2300.00

Transaction ID : SB21.16380

B. Walter Sparkman

Mailing Address 7617 S. Michigan Ave.

City	State	Zip Code
Chicago	IL	60619

Purpose of Disbursement
GASOLINE ALLOWANCE

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2013

Amount of Each Disbursement this Period

50.00

Transaction ID : SB21.16408

c. Walter Sparkman

Mailing Address 7617 S. Michigan Ave.

City	State	Zip Code
Chicago	IL	60619

Purpose of Disbursement
LUNCH ALLOWANCE - 3 PEOPLE

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2013

Amount of Each Disbursement this Period

20.00

Transaction ID : SB21.16409

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2370.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 25

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Walter Sparkman Full Name (Last, First, Middle Initial)			Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 11 / 23 / 2013</div> </div>	
Mailing Address 7617 S. Michigan Ave.			Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> \$ 30.00 </div>	
City Chicago State IL Zip Code 60619		Transaction ID : SB21.16423		
Purpose of Disbursement lunch allowance - 3 people - petition drive		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> Category/Type 005 </div>		
Candidate Name		Disbursement For:		
Office Sought: <div style="display: flex; align-items: center;"> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div>		<div style="display: flex; align-items: center;"> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </div>		
State: District:		Category/Type		

B. Tammy A. Taylor Full Name (Last, First, Middle Initial)			Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 11 / 20 / 2013</div> </div>	
Mailing Address 1300 West 96th Street			Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> \$ 290.00 </div>	
City Chicago State IL Zip Code 60643		Transaction ID : SB21.16416		
Purpose of Disbursement STIPEND - PETITION DRIVE		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> Category/Type 005 </div>		
Candidate Name		Disbursement For:		
Office Sought: <div style="display: flex; align-items: center;"> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div>		<div style="display: flex; align-items: center;"> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </div>		
State: District:		Category/Type		

C. Full Name (Last, First, Middle Initial)			Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y</div> </div>	
Mailing Address			Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> \$ </div>	
City State Zip Code		Category/Type		
Purpose of Disbursement		Disbursement For:		
Candidate Name		<div style="display: flex; align-items: center;"> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </div>		
Office Sought: <div style="display: flex; align-items: center;"> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div>		State: District:		

SUBTOTAL of Disbursements This Page (optional).....		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> \$ 320.00 </div>
TOTAL This Period (last page this line number only).....		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> \$ 30376.28 </div>

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 25

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Amber, InnNature of Debt (Purpose):
Space Rental

Mailing Address 3901 S. Michigan Avenue

City State

Chicago

Zip Code

IL

60653

Outstanding Balance Beginning This Period

1300.00

Transaction ID : SD10.2928

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Apostolic Faith ChurchNature of Debt (Purpose):
Refund

Mailing Address 3823 S. Indiana Ave.

City State

Chicago

Zip Code

IL

60653

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.457

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

A T & TNature of Debt (Purpose):
LONG DISTANCE

Mailing Address Bill Payment Center

City

Chicago

State

IL

Zip Code

60600

Outstanding Balance Beginning This Period

1318.61

Transaction ID : SD10.2909

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1318.61

1) **SUBTOTALS** This Period This Page (optional) ▶

3118.61

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 OF 25

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Leah Bloomenthal

Nature of Debt (Purpose):

Office Supplies

Mailing Address 6325 N. Sheridan

City State

Chicago

Zip Code

IL

60647

Outstanding Balance Beginning This Period

62.40

Transaction ID : SD10.458

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

62.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Chubb Group Insurance Companies

Nature of Debt (Purpose):

Insurance

Mailing Address 30 N. LaSalle

Suite 3510

City State

Chicago

Zip Code

IL

60602

Outstanding Balance Beginning This Period

1910.00

Transaction ID : SD10.2924

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1910.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Citizens for Gary Lapille

Nature of Debt (Purpose):

Refund

Mailing Address P.O. Box 64665

City

Chicago

State

IL

Zip Code

60664-1664

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.459

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

3972.40

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 25

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ComEd

Nature of Debt (Purpose):

Electricity

Mailing Address Bill Payment Center

City State

Zip Code

Chicago

IL

60600

Outstanding Balance Beginning This Period

9.96

Transaction ID : SD10.8787

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Friends of Bobby Rush

Nature of Debt (Purpose):

Estimated Debt for Space usage. Actual
amount To Be Determined'

Mailing Address P.O. Box 7292

City State

Zip Code

Chicago

IL

60680-7292

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.16392

Amount Incurred This Period

2100.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Grainger Terry, Inc.

Nature of Debt (Purpose):

Printing & Mailing

Mailing Address 1965 W. Pershing Road
Building A, 3rd Floor

City

State

Zip Code

Chicago

IL

60609

Outstanding Balance Beginning This Period

6890.00

Transaction ID : SD10.11451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6890.00

1) **SUBTOTALS** This Period This Page (optional) ▶

8999.96

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 OF 25

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Charisse Hodges

Nature of Debt (Purpose):

Salary

Mailing Address 3348 S. Giles Ave.

City State

Chicago

Zip Code

IL

60616

Outstanding Balance Beginning This Period

850.00

Transaction ID : SD10.460

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

James Biery Communications

Nature of Debt (Purpose):

Public Relations Fee

Mailing Address 435 W. Wisconsin

City State

Chicago

Zip Code

IL

60614

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.461

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lori Ann Bass & Associates

Nature of Debt (Purpose):

Fundraising Fee

Mailing Address 730 N. Franklin

City

Chicago

State

IL

Zip Code

60611

Outstanding Balance Beginning This Period

94.54

Transaction ID : SD10.462

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

94.54

1) **SUBTOTALS** This Period This Page (optional)

1944.54

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 OF 25

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gil N. McCoyNature of Debt (Purpose):
Refund

Mailing Address 5210 S. Blackstone

City State

Zip Code

Chicago

IL

60615

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

People's EnergyNature of Debt (Purpose):
Heating Fuel

Mailing Address Bill Payment Center

City State

Zip Code

Chicago

IL

60600

Outstanding Balance Beginning This Period

1403.92

Transaction ID : SD10.8788

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1403.92

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Progressive Land DevelopersNature of Debt (Purpose):
Office Rent

Mailing Address 7801 S. Cottage Grove

City

State

Zip Code

Chicago

IL

60619

Outstanding Balance Beginning This Period

1400.00

Transaction ID : SD10.452

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

1) **SUBTOTALS** This Period This Page (optional) ▶

3803.92

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Trib-Co ConstructionNature of Debt (Purpose):
Refund

Mailing Address 500 West Monroe

City State

Zip Code

Chicago

IL

60661

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.453

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Trilla Stell Drum Corp.Nature of Debt (Purpose):
Refund

Mailing Address 2959 West 47th Street

City State

Zip Code

Chicago

IL

60632

Outstanding Balance Beginning This Period

200.00

Transaction ID : SD10.454

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Vision, Health Mgmt SystemsNature of Debt (Purpose):
REfund

Mailing Address 2838 S. Indiana

City

State

Zip Code

Chicago

IL

60616

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.455

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional) ▶

750.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 25 OF 25

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robert Wright

Nature of Debt (Purpose):

Salary

Mailing Address 1212 S. Michigan

City State

Zip Code

Chicago

IL

60609

Outstanding Balance Beginning This Period

3000.00

Transaction ID : SD10.456

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ►

3000.00

2) **TOTALS** This Period (last page this line number only) ►

25589.43

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

25589.43